

VILLAGE OF WATERFORD 123 N. River St. Waterford, WI 53185 (262) 534-7911		UNIFORM PLUMBING PERMIT APPLICATION		PERMIT NO. TAX KEY #	
ISSUING MUNICIPALITY VILLAGE OF WATERFORD		PROJECT LOCATION (Building Address)		<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> ONE & TWO FAMILY	
		PROJECT DESCRIPTION			
Owner's Name _____		Mailing Address - Include City & Zip _____		Telephone - Include Area Code _____	
Contractor's Name _____		Mailing Address - Include City & Zip _____		Telephone - Include Area Code _____	
Estimated Cost _____	Bonding/Insurance Company _____			Master Plumber's License Number _____	

SCHEDULE OF INSPECTION FEES			
NEW CONSTRUCTION / ADDITIONS (INTERIOR)	EACH	COUNT	FEE
Base Fee (per unit)			\$40.00
Plus Area Fee		Sq. Ft.	_____
		for entire area	_____

REPLACEMENT, MODIFICATION OR EXTERIOR PLUMBING: \$40.00 BASE FEE PLUS INDIVIDUAL FEES BELOW							
	EACH	COUNT	FEE		EACH	COUNT	FEE
Storm Sewer Conductor	\$5.50			Building Drain	\$20.00		
Water Softener	\$5.50			Sanitary Building Drain			
Sight Drain	\$5.50			First 100 feet	\$15.00		
Floor Drain	\$5.50			Over 100 feet	\$0.45/ft		
Water Closet	\$5.50			Storm Building Drain			
Sink	\$5.50			First 100 feet	\$15.00		
Bath Tub	\$5.50			Over 100 feet	\$0.45/ft		
Shower	\$5.50			Manhole	\$10.00		
Urinal	\$5.50			Catch Basin	\$10.00		
Laundry Wall Outlet (Washer)	\$5.50			Water Service (Lateral)			
Dishwasher	\$5.50			First 100 feet	\$15.00		
Disposer	\$5.50			Over 100 feet	\$0.45/ft		
Water Heater	\$5.50			Sanitary Building Sewer			
Hose Bibb	\$5.50			First 100 feet	\$15.00		
Sump Pit / Ejector Pump	\$5.50			Over 100 feet	\$0.45/ft		
Future Waste	\$5.50			Storm Building Sewer			
Grease Trap	\$5.50			First 100 feet	\$25.00		
Bubbler / Water Fountain	\$5.50			Over 100 feet	\$0.45/ft		
Ice Maker	\$5.50			Conversion	\$20.00		
Soda Fountain	\$5.50			Wells (Repair of Existing Wells Only)	\$30.00		
Other Fixtures	\$5.50			Well Permit Required - see s. 223-11			
				Pumps	\$30.00		
				Other			

Minimum Permit Fee	\$40.00
Reinspection Fee	\$50.00
Preparing and mailing forms	\$20.00

DOUBLE FEES ARE CHARGED WHEN WORK IS STARTED WITHOUT A PERMIT, EXCEPT IN EMERGENCIES

The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate.

Have Permit/Application number and address when requesting inspections. Call (800) 422-5220. Give at least 24 hours notice on all inspections.

SIGNATURE OF APPLICANT _____	DATE _____
-------------------------------------	-------------------

FEES:	PERMIT(S) REQUIRED:	PERMIT EXPIRATION:	PERMIT ISSUED BY MUNICIPAL AGENT:
Plan Review Fee _____ Inspection Fee _____ Administration Fee _____ Other _____ Total _____	<input type="checkbox"/> Construction _____ <input type="checkbox"/> HVAC _____ <input type="checkbox"/> Electrical _____ <input type="checkbox"/> Plumbing _____ <input type="checkbox"/> Other _____	Permit expires two years from date issued unless otherwise noted below:	CONDITIONS OF APPROVAL This permit is issued pursuant to the attached conditions. Name _____ Date _____ Certification No. _____